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WGIUPD

GENERAL INFORMATION SYSTEM

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DIVISION: Office of Medicaid Management

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TO: Local District Commissioners, IM Directors, MA Directors,
Staff Development Coordinators
FROM: Ann Clemency Kohler, Director, Office of Medicaid Management
Patricia A. Stevens, Deputy Commissioner, Division of Temporary
Assistance
SUBJECT: Alien Provisions of the Welfare Reform Bill
EFFECTIVE DATE: Immediately
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This is to alert social services districts of actions required immediately as a result of recently enacted provisions in State law impacting the eligibility of non-citizens for Medicaid.

Administrative Directive 97 ADM-8 informed social services districts of federal changes under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) which changed the eligibility of non-citizens for federal means-tested programs, including the Temporary Assistance for Needy Families (TANF) program and the Medicaid program. This Administrative Directive further advised that non-citizens who did not meet the new federal requirements, but who were eligible for Public Assistance and Medicaid under existing State law, would continue to be provided benefits without federal participation. Districts were advised to code such individuals in the Welfare Management System (WMS) with a State/Federal Charge Indicator Code of 41, to prevent improper federal claims.

NOTE: Since 97 ADM-8 was issued, the PRWORA was amended to include Cuban and Haitian entrants as qualified aliens, and to require Amerasian immigrants to be treated as refugees. Therefore, these two groups should be added to the listing of "Qualified Aliens" and "Specially Qualified Aliens" contained in Attachment A of 97 ADM-8.

MEDICAID

With the enactment of Section 122 of Social Services Law, non-citizens who are permanently residing in the United States under color of law (PRUCOL) but who do not meet the criteria specified in Attachment A of 97 ADM-8 (as modified above), are no longer eligible for full Medicaid benefits. Such individuals may receive Medicaid coverage for care and services necessary for the treatment of emergency medical conditions, if they are otherwise eligible. (Federal participation is available for the costs of such coverage for persons who are otherwise related to a federally-participating category of assistance.)

There is an exception in the law for non-citizens who, on August 4, 1997, were residing in a residential health care facility licensed by the Department of Health, or in a residential facility licensed, operated or funded by the Office of Mental Health or the Office of Mental Retardation and Developmental Disabilities and were in receipt of Medical Assistance based on a finding that they were PRUCOL. Such individuals remain eligible and should continue to be coded with a State/Federal Charge Code of 41.

The provisions of the legislation are effective immediately. Therefore, except as noted above, individuals in Medicaid-only cases (Case Type 20) who were coded with a State/Federal Charge Indicator Code of 41, or who districts subsequently identify as ineligible aliens, must be closed. Such individuals should be provided timely and adequate notice that they are not eligible for Medicaid due to their alien status. The following language must be used to discontinue non-qualified aliens:

This is because you are not a citizen or a qualified alien.

Qualified aliens include:

- o persons lawfully admitted for permanent residence;
- o persons admitted as refugees;
- o persons granted asylum;
- o persons granted status as Cuban and Haitian entrants;
- o persons whose deportation has been withheld;
- o persons paroled into the United States for at least one year;
- o persons granted conditional entry; or
- o persons determined to be battered or subject to extreme cruelty in the United States by a family member.

Persons who are not citizens or qualified aliens may receive Medical Assistance coverage only for the treatment of emergency medical conditions, or for medical services provided to pregnant women, if they are otherwise eligible.

Should you require Medical Assistance as a result of an emergency medical condition or pregnancy, you may reapply.

This decision is based on Section 122 of Social Services Law.

The following language must be used to discontinue qualified aliens who are subject to the five year ban:

This is because you are a qualified alien who entered the United States on or after August 22, 1996.

Qualified aliens who enter the United States on or after August 22, 1996, may receive Medical Assistance coverage during their first five years in the United States only for the treatment of emergency medical conditions, or for medical services provided to pregnant women, unless the alien is:

- o admitted as a refugee;
- o granted asylum;
- o a Cuban and Haitian entrant;
- o a person whose deportation has been withheld;
- o a qualified alien on active duty in the Armed Forces of the United States, or the spouse or unmarried dependent child of the alien;
- o a qualified alien who is a veteran of the Armed Forces of the United States, or the spouse or unmarried dependent child of the veteran.

You have not told us that you need coverage for the treatment of an emergency medical condition or pregnancy.

You may reapply for Medical Assistance after you have resided in the United States for five years, or if you require coverage as a result of an emergency medical condition or pregnancy.

This decision is based on Section 122 of Social Services Law.

New applicants who do not meet the criteria outlined in 97 ADM-8 (as modified above) should be denied unless the applicant has documented an emergency medical condition or pregnancy.

PUBLIC ASSISTANCE

Section 122 of the Social Services Law allows non-citizens who are PRUCOL but who do not meet the criteria specified in Attachment A of 97 ADM-8 (as modified above) to continue to receive Public Assistance under the Safety Net program. At this time, districts should continue to provide assistance under PG-ADC (Case Type 14) or HR (Case Type 16), and should continue to code such individuals with a State/Federal Charge Code of 41. System enhancements to prevent the automatic generation of Medicaid coverage for these non-citizens active in PG-ADC or HR cases are under development. Further instructions for Public Assistance cases will be provided at a later date.

A report identifying individuals coded in WMS with a State/Federal Charge Indicator Code of 41 will be sent to each district. Further information about this report will be provided at a later date.